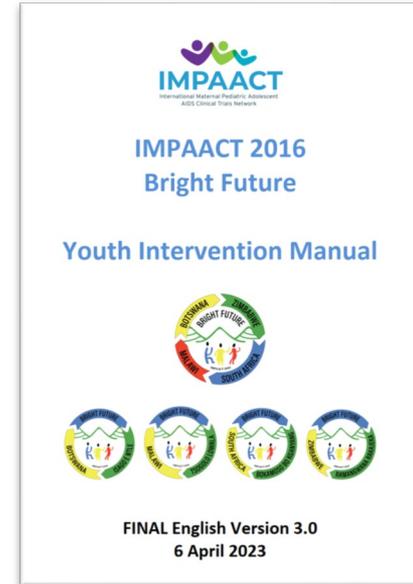


Bright Future Intervention

Intervention: Peer-led, group-based, Trauma-Informed Cognitive Behavioral Therapy (TI-CBT)

- Youth: 6 sessions; 120 minute weekly sessions (or completed within 8 weeks).
- Content focuses on:
 - ▶ Psychosocial and health education
 - ▶ Cognitive restructuring
 - ▶ Relaxation techniques

Please visit **CROI poster 873** and **poster 1129** for intervention results



Key Methods

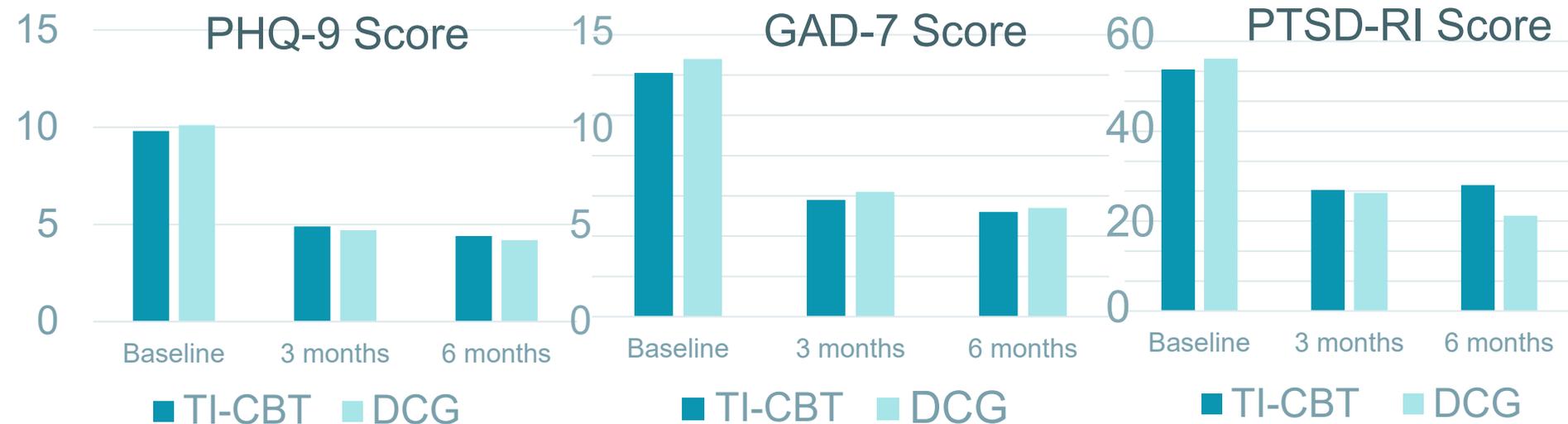
- ▶ **Design:** Two-arm, individually randomized, peer-led group treatment trial
 - ▶ Trauma Informed-Cognitive Behavioral Therapy compared to Discussion Control Group
- ▶ **Study Population:**
 - ▶ Youth with HIV and aware of status
 - ▶ 15-19 years of age
 - ▶ Self-reported mental distress:
 - ◆ PHQ-9 ≥ 10 (depression) and/or;
 - ◆ GAD-7 ≥ 10 (anxiety) and/or;
 - ◆ UCLA PTSD-Reaction Index score ≥ 35 (trauma)



- Malawi (Lilongwe and Blantyre)
- Botswana (Gaborone and Molepolole)
- South Africa (Soweto)
- Zimbabwe (St. Mary's, Seke North, Harare Family Care)

Key Findings

- **Participants enrolled N= 254** (March 2024 – July 2024)
- **70%** of youth with HIV screened and enrolled in the trial
- **87%** of youth had viral suppression (<200 copies/mL) at baseline with no change over time, nor between arms



Conclusions

- ▶ Rapid enrollment underscores a **high rate of mental distress** and **desire for mental health care**.
- ▶ The trial demonstrated **clinically meaningful improvement in mental distress in both arms**, though no significant difference between arms immediately post intervention, nor at 6-months.
- ▶ IMPAACT 2016 suggests **training and supervision of youth leaders to facilitate group discussion in a safe space can offer a scalable strategy to support the mental health of youth with HIV**.